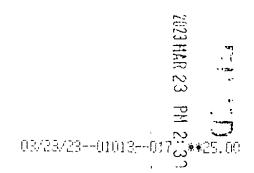
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(Rec	questor's Name)	
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PICK-UP	WAIT	MAIL
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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJEC		TAL PROPERTIES LLC		
SUBJEC	-1.	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		DARRELL OLDS		
			Name of Person	
		OLDS RENTAL PROPER	RTIES LLC	
			Firm/Сотралу	· · · · · · · · · · · · · · · · · · ·
		2455 OSCEOLA AVE		
			Address	
		CAMPBELLTON/FLORI	DA 32426	
			City/State and Zip Code	·
		INFO@APLACETOSTAY		
			to be used for future annual report	notification)
For furth	er information co	oncerning this matter, please c	all:	
DARRE	LL OLDS		850 at ()	272 - 1463
	Name of	Person	Area Code Day	rtime Telephone Number
Enclosed	is a check for th	e following amount:		
₩\$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

OLDS	REN	TAL	PROP	ERTIES	LLC

The Articles of Organization for this Limited Liability Company were filed on FEB 07, 2023

and assigned

(Name of the Limited Liability Company as it now appears on our records:)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: OLDS & ASSOCIATES ENTERPRISES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Taylor Newman 7901 4th St N Enter Florida street address St. Petersburg Tip Code 7/10 Code	Florida document number L23000068810				
OLDS & ASSOCIATES ENTERPRISES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registeragent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Taylor Newman New Registered Office Address: Enter Florida street address St. Petersburg Florida 33702	This amendment is submitted to amend the following	owing:			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the new registeragent and/or the new registered office address here: Name of New Registered Agent: Taylor Newman New Registered Office Address: Taylor Newman New Registered Office Address: Enter Florida street address St. Petersburg Florida 33702	A. If amending name, enter the new name of	f the limited liab	ility company here:		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing address MAY BE A POST OFFICE BOX) Enter new mailing address MAY BE A POST OFFICE BOX) Enter new mailing address MAY BE A POST OFFICE BOX TAMPA, FLORIDA 33602 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registeragent and/or the new registered office address here: Name of New Registered Agent: Taylor Newman New Registered Office Address: Taylor Newman New Registered Office Address: Enter Florida street address Enter Florida street address Florida 33702 Florida 33702	OLDS & ASSOCIATES ENTERPRISES LLC				
Enter new principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: Taylor Newman New Registered Office Address: Taylor Newman New Registered Office Address: Enter Florida street address St. Petersburg Florida 33702	The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designar	tion "LLC" or the ab	breviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: Taylor Newman New Registered Office Address: Toylor Newman Toylor Newman	Enter new principal offices address, if applic	able:	100 S. ASHLEY DRI	VE	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registeragent and/or the new registered office address here: Name of New Registered Agent: Taylor Newman New Registered Office Address: Taylor Newman New Registered Office Address: Enter Florida street address St. Petersburg Florida 33702	• • •		SUITE 600		
SUITE 600 TAMPA, FLORIDA 33602			TAMPA, FLORIDA	33602	
TAMPA, FLORIDA 33602 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: Taylor Newman	Enter new mailing address, if applicable:		100 S. ASHLEY DRI	VE	
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: Taylor Newman	(Mailing address MAY BE A POST OFFICE	BOX)	SUITE 600		
Name of New Registered Agent: New Registered Office Address: Taylor Newman 7901 4th St N Enter Florida street address St. Petersburg, Florida 33702		<u>-</u> _	TAMPA, FLORIDA	33602	
St. Petersburg , Florida 33702	agent and/or the new registered office addres	ss here:		s, <u>enter the nam</u>	e of the new registered
Enter Florida street address St. Petersburg , Florida 33702	New Registered Office Address:	7901 4th St N			
St. Petersburg , Florida 33702			Enter Florida str	eet address	
City Zin Code		St. Petersburg		, Florida ³³⁷	702
Eny Eng Code			City		Zip Code

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			□Change
			□Add
			□Remove
		.	□Change
			□ Add
			Remove
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ective date, if other than the neffective date is listed, the date muster. If the date inscrted in this blooment's effective date on the December 1.	t be specific and cock does not me	cannot be prior to cet the applicat	date of filing or	more than 90 d ing requireme	_ (optional) ays after filing. nts, this date) Pursuant to 605,02 will not be listed
cord specifies a delayed effective s filed.	date, but not a	n effective tim	ie, at 12:01 a.m	i. on the earlie	erof:(b) Th	e 90th day after th
ed MARCH 22	_	2023				
	, de	2	- '			
	AG.					
	Signature is a mi	ander or author	zed representati	ve of a member		